MEDICAID MEMO

TO: All Providers of Pre-Admission Screening Services Participating in the Virginia Medical Assistance Program, Managed Care Organizations, and Medicare/Medicaid Programs

FROM: Cynthia B. Jones, Director
Department of Medical Assistance Services (DMAS)

MEMO: Special

DATE: 6/25/2014

SUBJECT: Composition of Pre-Admission Screenings for Teams

The purpose of this memorandum is to provide information regarding implementation of House Bill (HB) 890 passed by the 2014 Virginia General Assembly. This bill provides the Department of Medical Assistance Services (DMAS) with the authority to identify "other *Department-designated assessor"* to participate on the community-based preadmission screening (PAS) team as an alternative to a social worker, to conform with the requirements of Virginia Code §54.1-3709 restricting the use of the title "Social Worker".

DMAS Actions

To carry out the requirement of HB 890, the following actions are occurring:

- Effective immediately, DMAS has defined "*or other Department-designated assessor*" to mean "qualified local department of social services employee" including family services specialists and others who have been trained to administer the Uniform Assessment Instrument (UAI) and conduct the preadmission screenings in their localities.

- DMAS will review and modify its Interagency Agreement with the Virginia Department of Social Services to reflect the DMAS designation of "*or other Department-designated assessor."*

- DMAS will promulgate a Fast-Track regulatory change to make the designation described in the first bullet a permanent designation.

- Upon completion of the regulatory process, DMAS will update the Preadmission Screening Provider Manual to reflect the regulatory designation.

General Questions Regarding Preadmission Screenings:

General inquiries related to community preadmission screenings should continue to be directed to:

Health Districts:
Joanne Wakeham, RN, PhD.
Department of Health

109 Governor Street
Richmond, VA 23219
804-864-7017
Joanne.Wakeham@VDH.Virginia.gov

Local DSS Adult Services/Preadmission Screeners:
Paige McCleary
Adult Protective Services Division
Department for Aging and Rehabilitative Services
8004 Franklin Farms Drive
Richmond, VA 23229
804-662-7605
Paige.McCleary@dars.virginia.gov

As changes occur, providers of preadmission screening services will be kept advised via Medicaid Memorandum and Provider Manual revisions.

COMMONWEALTH COORDINATED CARE
Commonwealth Coordinated Care (CCC) is a new initiative to coordinate care for individuals who are currently served by both Medicare and Medicaid and meet certain eligibility requirements. Please visit the website at http://www.dmas.virginia.gov/Content_pgs/altc-home.aspx to learn more.

MANAGED CARE ORGANIZATIONS
Many Medicaid recipients are enrolled with one of the Department's contracted Managed Care Organizations (MCO). In order to be reimbursed for services provided to an MCO enrolled individual, providers must follow their respective contract with the MCO. The MCO may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the MCO directly. Additional information about the Medicaid MCO program can be found at http://www.dmas.virginia.gov/Content_pgs/mc-home.aspx.

VIRGINIA MEDICAID WEB PORTAL
DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the Xerox State Healthcare Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 a.m. to 5:00 p.m. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access service authorization information including status via KEPRO's Provider Portal at http://dmas.kepro.com.

"HELPLINE"
The "HELPLINE" is available to answer questions Monday through Friday from 8:00 a.m. to 5:00 p.m., except on holidays. The "HELPLINE" numbers are:

> 1-804-786-6273   Richmond area and out-of-state long distance
> 1-800-552-8627   All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.